

POLICY AND PROCEDURE MANUAL BUREAU OF QUALITY IMPROVEMENT SERVICES		
SUBJECT: BQIS COMPLAINTS		CHAPTER:
SUBJECT NUMBER:		CHAPTER NUMBER:
APPLICATION: <u> X </u> BQIS Field Service Offices <u> </u> Ft. Wayne State Developmental Center <u> X </u> BQIS Central Office <u> </u> Muscatatuck State Developmental Center		
INITIAL DATE OF POLICY: 2/26/03		REVISION/REVIEW DATE: November 2, 2005
AUTHORED BY: Patrick Dickerson		APPROVED BY: Ellen McClimans PAGE: 1

I. POLICY/PURPOSE STATEMENT

It is the policy of the Bureau of Quality Improvement Services that all complaints within the Bureau are addressed in a timely manner and result in assuring the health and safety of individuals receiving services coordinated and administered by the Bureau of Developmental Disabilities Services, and the Indiana Division of Aging.

III. DEFINITIONS

- a) “Bureau of Developmental Disabilities Services” (BDDS) - The entity established in IC 12-11-1.1-1 to plan, coordinate, and administer the provision of individualized, integrated, community based services for individuals with a developmental disability and their families, within the limits of resources.
- b) “Indiana Division of Aging” (IDA/BAIHS) – The entity established in IC 12-10-1-2 to assist the constantly increasing number of aged in: (1) maintaining self-sufficiency and personal well-being with the dignity to which the years of labor entitle the person; and (2) realizing the aged person's maximum potential as a creative and productive individual.
- c) “Bureau of Quality Improvement” (BQIS) – The entity established in IC 12-12.5 to monitor services to individuals by organizations/providers funded by or funded under the authority of the Division of Disability, Aging and Rehabilitative Services, and organizations/providers that have entered into a provider agreement under IC 12-15-11 to provide Medicaid in-home waiver services.

IV. REFERENCE

- a) IC 12-12.5-1-3 Establishment and administration of complaint process
- b) 460 IAC 6 Supported Living Services and Supports
- c) 460 IAC 7 Individualized Support Plan

V. EXHIBITS

- a) 460 IAC 6
- b) 460 IAC 7

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VI. PROCEDURE

RESPONSIBLE STAFF/PERSON

ACTIONS

A. Initial complaint

BQIS STAFF

1. The individual initially receiving a complaint determines whether the case manager, provider and/or local BDDS District Office have been made aware of the perceived problem, and given an opportunity to resolve the issue:
 - a) If not, the complainant is referred to the appropriate entity (case manager, provider, etc.) by the individual initially receiving the complaint.
 - b) If appropriate entities have had opportunities for resolution but the issue remains problematic, the issue is considered a formal complaint.
2. Initial complaints that indicate significant risk to health or safety (evident risk to health and safety if not addressed with urgency) are considered formal complaints, regardless of actions to date from a case manager, provider, or local BDDS District Office etc. Additionally, a determination regarding the need for an incident report is made, with reporting completed as indicated.
3. For formal complaints described in # 1(b) and 2 above, the individual initially receiving a complaint makes a referral to one of the following:
 - a) BDDS Quality Liaison:
 - i. Complaints involving individuals receiving services through BDDS;
 - b) IDA Quality Liaison:
 - i. Complaints involving individuals receiving waiver services through IDA.
 - c) BDDS Ombudsman:
 - i. Complaints initiated by families/individuals;
 - ii. Complaints involving rights/choice issues; or
 - iii. Complaints requiring coordination between legal services, division services and provider services.

B. Follow-up Actions & Responsibilities

BQIS Quality Liaison;

1. Upon notification the Quality Liaison or BDDS Ombudsman executes

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BDDS Ombudsman

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the following actions:

- a) Accepts responsibility for follow-up, unless circumstances indicate another party to be appropriate.
- b) If another individual is determined to be the appropriate entity to process the complaint, a referral (documented in writing) is provided to that individual who will complete the necessary follow up"(examples listed not intended to be all inclusive):
 - i. BDDS
 - Complaints regarding services from an ICF/MR setting (must be referred within one day);
 - Complaints involving denied claims due to outdated POCs.
 - ii. BQIS Director or Designee:
 - Complaints involving significant health and safety issues (see # 2 below).

All complaints referred to other appropriate persons by the Quality Liaison or BDDS Ombudsman remain “open” pending resolution by the party to whom the complaint was referred.
- c) Enters all details into the Complaint Investigation & Resolution System (CIRS) including name of individual complaint referred to, if referred, date, time and means of referral (e-mail, letter, etc.).
- d) Notifies complainant acknowledging receipt of complaint, including name and contact information of individual complaint is referred to, if referred, and documents in CIRS.
- e) Establishes hard copy complaint file which includes the case ID # from CIRS.

NOTE: Even if Quality Liaison or BDDS Ombudsman resolves complaint quickly, steps a) through e) above must still be executed.

2. Complaints involving significant health and safety issues for individuals in supported living settings (evident risk to health and safety if not addressed with urgency) are to be immediately referred to BQIS Director or Designee for review and possible referral to an appropriate party. Additional actions mandated include:
 - a) Documenting referral to BQIS Director or Designee in CIRS including date, time and how notified.
 - b) Providing a written copy of the complaint to the BDDS Director or Designee.
3. The BDDS Quality Liaison, the IDA Quality Liaison and the BDDS Ombudsman monitor all complaints initially referred to them (including

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all that were subsequently referred to a more appropriate individual), and provide the BQIS Director a status report bi-weekly detailing any cases remaining open, including actions being initiated to promote closure for each case.

C. Complaint Severity Level Determination

BQIS Director or Designee

1. The BQIS Director or Designee determines the severity level of the complaint within 24 hours for those complaints that involve significant health and safety issues for individuals receiving services. The levels are:
 - a) Critical – personal safety at risk.
 - b) Non-critical – no major impact to safety/services

Both critical and non-critical complaints require documentation of all actions taken in CIRS.

D. Investigation and follow-up for critical severity level

BQIS Director or Designee

1. BQIS Director or Designee assigns investigation to BQIS staff as deemed appropriate:

**BQIS Quality Liaison;
BDDS Ombudsman**

- a) Quality Liaison or BDDS Ombudsman, who:
 - i. Completes site visit/s if indicated;
 - ii. Conducts private interviews, if deemed appropriate;
 - iii. Requests documents/information from state agencies, provider companies and other entities as needed, providing a deadline for submission of 2 to 4 business days, unless otherwise specified.
 - iv. Notifies BQIS Director or Designee of any attempt by any party to prohibit or thwart interviews or other investigative processes, including failure to provide documents/information within expected time frames; and
 - v. Provides update report within 10 business days of investigation assignment via bi-weekly meetings with the BQIS Director (unless other time frame requested/approved by BQIS Director). If investigation not closed at 10 business days, continues updates on an every 10 business day schedule until the investigation is completed. All follow-up reports are to include a description of why case remains open, actions being taken to

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**BQIS Investigator BQIS
Quality Coordinator**

- complete investigation, and a projected completion date.
- b) BQIS Field Investigator/Quality Coordinator, who:
- i. Completes on site visit within 48 hours unless otherwise directed/approved by BQIS Director;
 - ii. Conducts one-on-one interviews with individuals receiving services. As needed, interpreters, legal guardian, health care representatives, and advocates may be asked by BQIS to participate in the interview.
 - iii. Conducts one-on-one interviews with other individuals involved in the issue being investigated, as deemed appropriate by BQIS. No other person or party is permitted to be present during this interview.
 - iv. Requests documents/information from state agencies, provider companies and other entities as needed, providing a deadline for submission of 2 to 4 business days, unless otherwise specified;
 - v. Notifies BQIS Director or Designee of any attempt by any party to prohibit or thwart interviews or other investigative processes, including failure to provide documents/information within expected time frames; and
 - vi. Provides update report within 10 business days of investigation assignment in writing (unless other time frame requested/approved by BQIS Director). If investigation not closed at 10 business days, continues written update reports on an every 10 business day schedule until the investigation is completed. All follow-up reports will include a description of why case remains open, actions being taken to complete investigation, and a projected completion date.

E. Investigation and follow-up for non-critical severity level.

BQIS Director/Designee

**BQIS Quality Liaison
BDDS Ombudsman**

1. Complaint is referred to the BDDS Quality Liaison, IDA Quality Liaison, or BDDS Ombudsman who:
 - a) Within 3 (three) business days reviews appropriate documentation as applicable for previous 12 months (not intended to be all inclusive):
 - i. 90 day CM checklist;
 - ii. ISP;
 - iii. POC;
 - iv. CCB;

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- v. Chrono notes in DART;
- vi. Chrono notes in Insite;
- vii. Incident Reports;
- viii. Prior complaints in ACTS and CIRS; and
- ix. Any other pertinent information based on complaint.
- b) Within 10 business days gathers information from the following as appropriate, dependent on the nature of the complaint (hard copy documents; interviews; etc.):
 - i. BDDS Service Coordinator and/or DDRS designee;
 - ii. Case Manager;
 - iii. Individual/legal representative; and
 - iv. All relevant providers of services and supports.

Note: Interviews, when undertaken, should be initiated as soon as is possible to ensure the quality of information obtained, and timeliness of the investigation process. Interviews are to be one-on-one interviews with individuals receiving services. As needed, interpreters, legal guardian, health care representatives, and advocates may be asked by BQIS to participate in the interview. Interviews with other individuals involved in the issue being investigated, as deemed appropriate by BQIS, will be conducted one-on-one. No other person or party is permitted to be present during this interview.

If the nature of the complaint indicates that it would not be helpful or appropriate to contact one of the parties listed above, documentation of the reasons why the parties were not contacted should be included in the summary of the complaint.

- c) Requests documents/information from state agencies, provider companies and other entities as needed, providing a deadline for submission of 2 working days unless otherwise specified.
- d) Notifies BQIS Director of any attempt by any party to prohibit or thwart interviews or other investigative processes, including failure to provide documents/information within expected time frames.
- e) Presents a summary of the findings of the document review and interviews within to the BQIS Director or designee within 10 business days. Report should identify all issues, status of resolution for each, and projected closure date.
 - i. If complaint is not closed at 10 business days, follow-up reports are presented on a bi-weekly schedule until closed. All

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follow-up reports will include justification for case remaining open, actions being taken to close case, and a projected closure date.

F. Cooperation with Investigation Process

- | | |
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| State Agency and Provider 1.
Company
Employees/agents | Cooperate with the Bureau of Quality Improvement Services with interviews, submission of requested documentation, and all other actions associated with the investigation and resolution of a complaint. |
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G. Completion of BQIS Complaint Investigation Reports

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| BQIS Quality Liaisons
BDDS Ombudsman
BQIS Field Investigator
BQIS Quality Coordinator | 1. The Complaint Investigation Report is to be sent to BQIS Director, or BQIS Quality Liaison if so directed, and include at minimum:
a) Individual's name;
b) Case ID # from CIRS;
c) Date of complaint;
d) Date of report;
e) Description of Complaint;
f) Statement of Issue(s);
g) Summary of data/information obtained (documentation review, interviews, and on-site complaint investigation);
h) Ancillary concerns;
i) Statement of findings;
j) Recommendations; and
k) Attachments. |
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H. Investigation Review & Action

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| BQIS Director or Designee | 1. Review the complaint investigation report, in conjunction with BDDS, IDA and/or other appropriate entities when indicated, ensuring necessary actions are initiated, including specific sanctions in accordance with 460 IAC 6.

2. Return hard copy complaint file, updated with actions initiated, to Quality Liaison or BDDS Ombudsman for follow-up and resolution actions as indicated. |
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I. Complaint Resolution

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- BQIS Director or Designee**
1. Assures all data in CIRS is updated with accurate and complete information, contacting other individuals who may have been responsible for the complaint during processing as necessary to ensure input of any missing information.
 2. Sends a final complaint letter to the complainant with copies to individual/legal representative, BDDS Service Coordinator, and Case Manager regarding status.
 3. Assures complaint hard copy file is complete.
 4. Transfers hard copy complaint file to BQIS Secretary to be filed with completed complaints.